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#### **MONTANA NURSE**

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### Would you like to serve on the Board of Nursing?

Governor Brian Schweitzer invites you to let him know if you are interested in being considered as a future member of the Board of Nursing (or of any other board or council to which he makes appointments). The Board of Nursing consists of nine members appointed for four year terms by the Governor. The terms/appointments are staggered to avoid a complete turn-over at one time.

To let the Governor know you wish to be considered for a future Board appointment, it is as simple as a few clicks on your computer. Go to <a href="http://www.governor.mt.gov">http://www.governor.mt.gov</a>, choose "Featured Online Services" and click on "Board Appointments". Follow the instructions and complete the brief questionnaire. During this process, you may also upload

The statutes describing the Board's composition and necessary qualifications for each position are provided below.

#### 2-15-1734. Board of nursing.

- (1) There is a board of nursing.
- (2) The board consists of nine members appointed by the governor with the consent of the senate. The members are:
  - (a) four registered professional nurses, of whom at least one must have had at least 5 years in administrative, teaching, or supervisory experience in one or more schools of nursing, at least one must be an advanced practice registered nurse, at least one must be engaged in nursing practice in a rural health care facility, and at least one must be currently engaged in the administration, supervision, or provision of direct

client care. Each member who is a registered professional nurse must:

- (i) be a graduate of an approved school of nursing;
- (ii) be a licensed registered professional nurse in this state;
- (iii) have had at least 5 years' experience in nursing following graduation; and
- (iv) be currently engaged in the practice of professional nursing and have practiced for at least 5 years.
- (b) three practical nurses. Each must:
- (i) be a graduate of a school of practical nursing;
- (ii) be a licensed practical nurse in this state;
- (iii) have had at least 5 years' experience as a practical nurse; and (iv) be currently engaged in the

the way, if you are not comfortable using the web application, please feel free to contact the Governor by writing to him at: PO Box 200801, Helena MT 59620. Fax: 406-444-5529. Email: pkeebler@mt.gov.) All citizen boards play a vital role in government. Their success depends on the participation of committed Montanans. If you have any questions about the appointment application process or about service on the Board of Nursing, please contact Patti Keebler at 406-444-3862.

any electronic documents (such as letters,

resumes, CVs, etc.) you believe would be

helpful to the Governor as he makes deci-

mit' button to complete the process. (By

sions on Board appointments. When you're

finished with all the sections, click the 'Sub-

- practice of practical nursing and have practiced for at least 5 years.
- (c) two public members who are not medical practitioners, involved in the practice of nursing or employment of nursing, or administrators of Montana health care facilities.
- (3) All members must have been residents of this state for at least 1 year before appointment and must be citizens of the United States.
- (4) All members shall serve staggered 4-year terms, and a member may not be appointed for more than two consecutive terms. The governor may remove a member from the board for neglect of a duty required by law or for incompetency or unprofessional or dishonorable conduct.
- (5) The board is allocated to the department for administrative purposes only as prescribed in 2-15-121.

#### FROM THE EXECUTIVE DIRECTOR



Everyone
associated
with nursing
education
wants to
see good
outcomes —
but it is a
challenge to
get there!

......

#### **NURSING EDUCATION**

Our focus for this newsletter issue is nursing education. As you are probably all acutely aware, the faculty shortage is posing a significant challenge to meeting the nursing workforce needs. We are similar to other states in this regard, but we do have some unique concerns because we live and work in a frontier state. We are experiencing an increased demand to produce more nurses yet have little assurance that our graduates will stay in Montana to practice. Reports from Montana nursing programs indicate that approximately half of our registered nursing program graduates leave Montana to begin practice. Additionally, Montana has difficulty competing with other states in recruiting and retaining nurses - for a variety of reasons.

In this issue, we are providing information about the Board's roles and responsibilities in nursing education program approval and oversight. Each Montana program's results on the national licensure examinations (NCLEX RN and NCLEX PN) are featured. Since NCLEX pass rates are only one measure of program outcomes, albeit a very important one to the Board, we require that all programs design and implement a Program Evaluation Plan (PEP). Such a plan outlines key elements to nursing program outcomes in addition to NCLEX pass rates, such as employer satisfaction, program graduate satisfaction, and student evaluations of courses and faculty.

If the program's structure is academically sound, prepares individuals for a practice-based profession, and if processes are designed to make it work effectively, one would expect good outcomes. Over the course of several program surveys during the past 18 months, we have identified a degree of disconnect between the structure, process and outcomes in nursing education in our state and we are very committed to continue our work with stakeholders to resolve those issues. Everyone associated with nursing education wants to see good outcomes – but it is a challenge to get there!

# NEW FEATURE IN THE NEWSLETTER – DUPLICATE LICENSE REQUESTS

Because fraud is becoming a big issue in terms of license applications and license theft, we are now including a list of all duplicate licenses requested during the time period since the last newsletter publication. This issue's particular list goes back for one fiscal year because this is the first time we have included this information. I urge you to review that list routinely to make sure that nobody else has requested and received a duplicate of your Montana nursing license. This is just one more effort to enhance the integrity of our licensing processes and to protect those of you who legally hold a nursing license from fraud and theft.

As always, please feel free to call me if you wish to schedule a BON visit with nurses or employers in your area! We do not charge for this service – it is part of what we do and why we are here. Have a great summer!

Barbara Swehla, MN RN
Executive Director





# **Montana State Hospital**

Montana State Hospital is the state's only public inpatient psychiatric hospital. Established by the territorial legislature in 1877, MSH was the first human services program in the state.

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Mary Ann Zeisler, BAN, RN Associate Director

> **Anjeanette Lindle Department Counsel**

> > Patricia Bik **Board Counsel**

**Cari Harris** Program Manager

**Shelly Gloege** Licensing Specialist

**Kelly Pfeifer** Licensing Specialist

**Dustin Johnson** Compliance Specialist

> **Bruce Duenkler Investigator**

### **MONTANA STATE ADMINISTRATION**

Governor **Brian Schweitzer** 

**Department of Labor** & Industry Commissioner **Keith Kelly** 

**Division Administrator** Mike Cooney

#### RECENT BOARD ACTIONS

- Participated in a "Joint Meeting" between boards of similar nature as required by a new statute (MCA 37-1-107) in February - discussion points included legislative planning for 2009, requirements for continuing education for licensure, disciplinary processes, and consideration for implementing criminal background checks
- Approved education waivers for faculty in nursing programs that do not currently meet faculty qualifications requirements as allowed by administrative rule
- Accepted notification from MT Tech of the University of Montana, Butte, pertaining to dropping the practical nursing education component. They will now provide Associate RN education only
- Discussed NCSBN documents relating to the regulation of nursing education in its continuing efforts to make regulatory decisions based on evidence
- Performed two detailed reviews of the proposed changes to the nursing education rules with stakeholders
- Supported DPHHS proposal to facilitate Expedited Partner Therapy (EPT) for sexually transmitted diseases pending statutory change in pharmacy laws pertaining to prescribing requirements
- Discussed Provider Ordered Life Sustaining Treatment (POLST) proposal from the Board of Medical Examiners and

- DPHHS look for the POLST form in an upcoming newsletter issue
- Discussed a position statement on RNs performing procedures that do not require a license in Montana, such as massage therapy, permanent makeup application (tattoos), and hypnotherapy once it is approved, it will be posted on the website
- Made minor revisions to the Scope of Practice decision making model to improve clarity in the process
- Discussed and developed plans to create a position statement in collaboration with the Board of Medical Examiners regarding dual licensure (RN, LPN, Paramedic, EMT)
- Discussed the increased demand for refresher courses for purposes of re-entry into practice and remediation – staff will provide research and draft rules for future discussion and planning
- Continue to work with stakeholders on the following rule changes anticipated for rule hearings in 2008\*:
  - Education program curriculum and general rules
  - Non-routine application rules national waiver
  - Mandatory continuing education rules - new

note: watch for proposed rule change notices and hearing dates on our website

### MONTANA STATE BOARD OF NURSING STANDING COMMITTEE APPOINTMENTS

4/30/2008

#### **Education Committee**

Susan Raph, RN - Chairperson Deborah Hanson, Public Member Karen Pollington, RN Kathy Hayden, LPN Sharon Dschaak, LPN

#### **APRN** and **Practice** Committee

Karen Pollington, RN – Co-Chairperson for Practice Sharon Dschaak, LPN Deborah Hanson, Public Member Kathy Sprattler, LPN

Connie Reichelt, APRN - Co-Chairperson for APRN

Brenda Schye, Public Member Laura Weiss, RN, APRN

#### **Screening Committee**

Karen Pollington, RN Sharon Dschaak, LPN Brenda Schye, Public Member Susan Raph, RN

# **Adjudication Committee**

Kathy Hayden LPN, Chairperson Deborah Hanson, Public Member Kathleen Sprattler, LPN Laura Weiss, RN

#### **Budget Liaison:**

Karen Pollington, RN Member

#### Legislative Liaison:

Brenda Schye, Public Member

#### **Governance Ad Hoc Committee:**

Susan Raph, RN Educator Member. **President** 

Sharon Dschaak, LPN Member Karen Pollington, RN Member, Secretary

# **NURSING EDUCATION**

# Nursing Education Program Approval

Why do nursing regulators approve nursing programs when many professions leave this to their national accrediting bodies?

The Montana Board of Nursing [BON] is required by statute to approve pre-licensure nursing education programs as part of its role to ensure public safety and welfare. To support this requirement, the BON holds U.S. Department of Education (USDE) status as an accreditor/approver of post-secondary nursing education. While this recognition is voluntary, it provides assurance that the Board's approval processes meet national standards. Montana is one of 8 boards of nursing in the U.S that qualify for this status. Nursing education program approval is an essential function of the board for a number of reasons:

- To protect the public by developing and enforcing nursing education standards that are designed to prepare safe entry-level nursing practitioners;
- To ensure that graduates are eligible to sit for the national licensure examination, since exam applicants must graduate from a board-approved nursing program;
- To facilitate interstate endorsement of licenses (graduates from Montana programs have to meet a standard that is acceptable to all other BON jurisdictions in order to be licensed in those jurisdictions);
- To provide some assurances to prospective and current students that they would have a reasonable expectation of passing the licensure examination if they graduate from

a program that meets or exceeds the minimum standards.

In addition to BON approval, Montana schools may also seek national accreditation. There are two bodies that provide this service to nursing programs, NLNAC (National League for Nursing Accrediting Commission) and CCNE (Commission for Collegiate Nursing Education). It is important to note that while national nursing accreditation reflects on the quality of a program, the purpose of accreditation is different from Board approval and does not include public protection. Boards of nursing specifically adopt minimum standards to which programs must meet to ensure that graduates qualify for licensure in all board jurisdictions.

# Nursing is a unique profession in that:

Accreditation is not required of nursing programs, as it is in other disciplines. In fact, many nursing programs (especially LPN and ADN programs) do not apply for accreditation largely because the standards are higher and the cost to prepare and maintain those standards is significant.

National accrediting agencies do not have authority to close down nursing programs that don't meet their standards. In contrast, boards of nursing do have this statutory authority (but rarely have to use it). In medicine, for example, if a school is not accredited, it affects their federal funding, which readily prompts compliance. This is not the case in nursing. If a nursing pro-

gram was not accredited and did not have to go through an approval process, it most likely would just continue as is – there would be no meaningful consequences or impetus to change.

# U.S. nursing board jurisdictions 'approve' programs typically in 4 ways:

- A board may review the program's self-study report and perform site visits with subsequent board action on the report - regardless of whether or not the program is accredited by NLNAC or CCNE.
- A board offers 'deemed status' for programs accredited by NLNAC or CCNE

   and through this, board approval is granted. In several board jurisdictions, national accreditation is required, not optional, for this reason.
- 3) A board performs a site visit along with national accrediting body's site visit and uses the self study report generated by the program for NLNAC or CCNE to make a final agency decision regarding program approval.
- 4) A combination of the above and in all cases, the board has the authority to conduct a survey/site visit at any time if significant problems are identified through monitoring processes or brought to the board's attention

Deemed status is similar to that between JCAHO and other accrediting agencies, such as those agencies that accredit cancer treatment centers (ACS) or rehabilitation centers. JCAHO accepts those accreditations

and provides deemed status without performing its own review.

The Montana Board of Nursing has streamlined the program approval processes by conducting joint surveys with NLNAC and CCNE for program visits and reports. However, because the missions of these bodies are different, it is crucial for the Board to make its own decisions.

The BON, as a member of the National Council for State Boards of Nursing (NCSBN), has a pulse on issues, trends, and challenges in nursing education. The education consultants from boards of nursing across the country discuss relevant issues during monthly conference calls, facilitated by the Director of Education at NCSBN (Dr. Nancy Spector). Boards also support or participate in research being conducted to provide the 'evidence' necessary to evaluate the efficacy of established processes.

Research projects focusing on education have provided a great deal of evidence for boards of nursing to utilize in making their decisions. For example, NCSBN recently conducted a survey of educators and consumers/stakeholders regarding the approval process as a board responsibility. The results strongly supported the need for boards of nursing

to retain this responsibility. On a scale of 1-3, with 1 being very essential and 3 being not essential, the educators from basic nursing programs (n=534) responded, with a mean of 1.23, that the boards should approve nursing programs. In a separate NCSBN study with consumers/stakeholders, respondents supported national accreditation standards if the boards also retained authority to approve or disapprove programs and protect the public.

There are many driving forces that are influencing growth in nursing education programs across the nation. Greater demand is often accompanied with a request for a decrease in educational standards. The Institute of Medicine (IOM) has increased public awareness that medical and nursing errors kill 98,000 people annually; that is more than those who die from breast cancer, AIDS, or automobile accidents. It is a complex point of concern for many different healthcare agencies, organizations, and regulatory groups. While the country is experiencing a serious shortage of RNs, it would be shortsighted to compromise the educational standards of nursing at this time. In fact, the trends in the nursing profession are to increase the education and practical experiences of

nurses, not to decrease them. NCSBN has developed a position statement that calls for an increase in clinical experiences in nursing programs, yet nationally, we are seeing programs being developed that have no supervised clinical experience. The result will be a new RN who has not socialized into the professional role with an increased need for employers to provide transition programs. More importantly, if the standards for Montana nursing programs were to decrease, the health and welfare of Montana citizens would certainly be affected. It is critical that nursing regulators are knowledgeable and current as they address issues related to nursing education.

Increasing educational levels and practical experience for nurses is also supported by the American Organization of Nurse Executives (AONE) and the American Association of Colleges of Nursing (AACN), who are calling for a new entry credential at the master's level for nurses. Their research has demonstrated that a more highly educated nurse, with more clinical experiences, will be able to coordinate and carry out patient care more safely, effectively, efficiently, and economically. Some states are considering or implementing requirements for a baccalaureate degree in nursing within ten years of initial licensure, so we will watch for the outcomes of those decisions.

In conclusion, the approval of nursing programs is an important function of the Board of Nursing because of the unique inter-relatedness to the other regulatory functions of practice, licensure and discipline. The Board of Nursing has the resources of NCSBN, credentials, and expertise to make very important decisions that ultimately serve to protect the public.

# Anjeanette Lindle, prosecuting attorney for the Montana Board of Nursing, has been selected to serve a one year term on an NCSBN includes serving as board counsel or prosecuting attorney for other boards in addition to the Board of Nursing. She has truly been dedicated to developing an understanding of nursing

nmittee. The regulation in her capacity as the nmittee's Board's attorney.

**Appointed by the National Council of State** 

**Boards of Nursing Board Of Directors** 

one year term on an NCSBN committee. The committee's charge is to review discipline and alternative programs and provide

recommended regulatory practices for chemically dependent licensees.

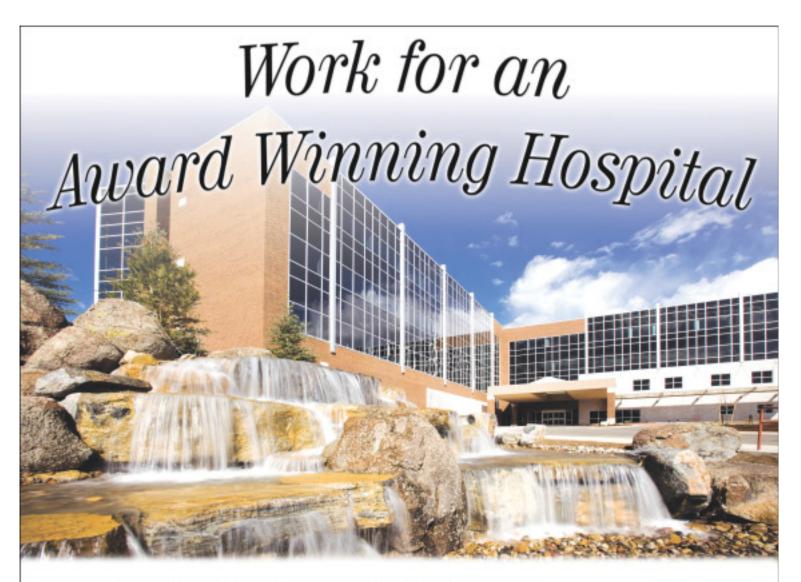
Ms. Lindle has been in her position at the Department of Labor and Industry for a year and a half, which

The Montana Board of Nursing is pleased to have representation from a frontier state on nursing regulation projects at the national level. This is a commitment to serve that is highly valued by the Board, knowing that the work of this committee will be beneficial to all Boards of Nursing, including Montana's. Thank you, Anjeanette, for being willing to serve!

Institute of Medicine. (2003). The Education of Healthcare Professionals: A Bridge to Quality. Washington, DC: National Academies Press.

Institute of Medicine., (2003). Keeping patients safe: transforming the work environment of nurses. Washington, DC: National Academies Press.

American Association of Colleges of Nursing (AACN). (February 2007). White Paper on the Education and Role of the Clinical Nurse Leader.



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# NCLEX Pass Rates Practical Nursing Programs — 1st Time Testers

CALENDAR YEAR – PRACTICAL NURSING	2004	2005	2006	2007
MONTANA PASS RATE	95.71	89.39	91.53	96.5
NATIONAL PASS RATE	89.36	89.06	84.65	87.25
	118	177	132	143
RATES PER PROGRAM - PRACTICAL NURSIN	<b>IG</b>			
MSU BILLINGS COT	2004	2005	2006	2007
PERCENTAGE PASSING	97.67	89.74	96.88	91.89
NATIONAL	89.36	89.06	84.65	87.25
NUMBER OF TESTERS	43	39	32	37
MSU GREAT FALLS COT	2004	2005	2006	2007
PERCENTAGE PASSING	100	100	94.74	100
NATIONAL	89.36	89.06	84.65	87.25
NUMBER OF TESTERS	20	16	19	39
UM HELENA COT	2004	2005	2006	2007
PERCENTAGE PASSING	91.3	87.1	87.88	100
NATIONAL	89.36	89.06	84.65	87.25
NUMBER OF TESTERS	21	31	66	7
UM MISSOULA COT	2004	2005	2006	2007
PERCENTAGE PASSING	92	87.18	91.67	97.96
NATIONAL	89.36	89.06	84.65	87.25
NUMBER OF TESTERS	25	39	48	49
UM MONTANA TECH BUTTE	2004	2005	2006	2007
PERCENTAGE PASSING	100	83.33	100	50
NATIONAL	89.36	89.06	84.65	87.25
NUMBER OF TESTERS	7	6	9	2
FLATHEAD VALLEY COMMUNITY COLLEGE	2004	2005	2006	2007
PERCENTAGE PASSING	NA	NA	NA	100
NATIONAL	89.36	89.06	84.65	87.25
NUMBER OF TESTERS	NA	NA	NA	7

# APRN CERTIFICATE RENEWALS — CHECK YOUR EXPIRATION DATE!

The Montana Board of Nursing requires Advanced Practice Registered Nurses (APRNs) to provide verification of their certification renewals to the Board of Nursing office within 30 days of the expiration date (24.159.1405(f)). As stated in 24.159.1413(2) "Advanced practice registered nurses who are recognized in the state of Montana may only practice as an advanced practice registered nurse in the clinical area of specialty practice in which they have national certification according to the scope, standards, or description of practice" and is defined by your certifying body. The APRN rules can be found at www.nurse.mt.gov and begin at 24.159.1401.

It is your responsibility to know when your certification expires and to provide your renewed certification to the board office. If the verification is not on record by the expiration date, a report of complaint is submitted to the Board's Screening Panel for possible license discipline.

### **NCLEX Pass Rates**

### **Registered Nursing Programs – 1st Time Testers**

CALENDAR YEAR - REGISTERED NURSING	PROGRAMS			
	2004	2005	2006	2007
MONTANA PASS RATES	87.42	87.42	85.01	83.29
NATIONAL PASS RATES	85.26	87.29	88.11	85.47
	318	323	407	419
RATES PER PROGRAM				
CARROLL COLLEGE BAN	2004	2005	2006	2007
PERCENTAGE PASSING	80	89.41	84.09	88.64
NATIONAL	85.26	87.29	88.11	85.47
NUMBER OF TESTERS	25	19	44	44
MILES COMMUNITY COLLEGE ASRN	2004	2005	2006	2007
PERCENTAGE PASSING	80.95	88.1	87.88	68.57
NATIONAL	85.26	87.29	88.11	85.47
NUMBER OF TESTERS	21	42	33	35
MSU BOZEMAN BSN	2004	2005	2006	2007
PERCENTAGE PASSING	92.68	88.32	93.23	91.86
NATIONAL	85.26	87.29	88.11	85.47
NUMBER OF TESTERS	123	137	192	172
MSU NORTHERN ASRN	2004	2005	2006	2007
PERCENTAGE PASSING	100	94.74	75.51	83.33
NATIONAL	85.26	87.29	88.11	85.47
NUMBER OF TESTERS	45	57	49	60
SALISH KOOTENAI COLLEGE ASRN	2004	2005	2006	2007
PERCENTAGE PASSING	83.87	83.33	65.52	80.77
NATIONAL	85.26	87.29	88.11	85.47
NUMBER OF TESTERS	31	30	29	26
UM HELENA COT ASRN	2004	2005	2006	2007
PERCENTAGE PASSING	NA	NA	78.57	58.33
NATIONAL	85.26	87.29	88.11	85.47
NUMBER OF TESTERS	NA	NA	14	24
UM MISSOULA COT ASRN	2004	2005	2006	2007
PERCENTAGE PASSING	NA	NA	60	85.71
NATIONAL	85.26	87.29	88.11	85.47
NUMBER OF TESTERS	NA	NA	5	14
MT TECH BUTTE ASRN	2004	2005	2006	2007
PERCENTAGE PASSING	76.06	86.84	75.61	70.45
NATIONAL	85.26	87.29	88.11	85.47
NUMBER OF TESTERS	71	38	41	44



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# MONTANA STATE BOARD OF NURSING **MONTANA NURSE**

#### **MAGAZINE SCHEDULE**

**ADVERTISING (COPY) DEADLINES** PUBLISHING DATE AD DEADLINE September 21 .....September 1 For advertising information December 21......December 3 March 21.....March 3

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# **NURSING EDUCATION**

Susan J. Wallace Raph, MN, RN, CNAA, BC

Board President

# A New Crop of Nurses

"We're so proud of him!" The petite elderly woman beamed as I shook her hand in congratulations of her grandson's pinning. Spring marks the entry of hundreds of new graduates into the nursing profession in Montana. When they arrive on your unit, do you embrace them? Do you create a nurturing environment to support their continued learning? I hope you do. The nursing profession and Montana patients depend on it.

Nursing education is faced with many challenges. The demand for new nurses to be produced quickly, in greater numbers, and with ever increasing knowledge, skills and abilities must be balanced with the need for quality nursing education. The theorist, Donabedian, (1980) asserted that quality is based upon the assessment of three conceptual elements: structure, the physical and



organizational attributes of the setting; process, the performance of getting from point A to B; and outcome, which is often illustrated through improvement or satisfaction. The fundamental relationship among structure, process and outcome is essential, in that "good structure increases the

likelihood of good process, and good process increases the likelihood of good outcome" (p. 1745). The NCLEX pass rate is often viewed as the primary measure of quality in nursing education. However, over the years, the Board of Nursing has established a comprehensive set of standards, or authoritative statements, used to judge quality. These standards are outlined in Subchapter 6, specifically Administrative Rules 24.159.601-680, and provide guidance for the provision of all aspects of nursing education in Montana. Specific standards relating to the need for adequate classroom and clinical resources, qualified faculty, curriculum goals, and NCLEX pass rates illustrate the various measures of quality that form the basis for the Board's program approval process and support a program's national accreditation efforts. The ultimate outcome is that new graduates are prepared to face the complex world of nursing and to safely care for Montana patients.

The National Council of State Boards of Nursing (NCSBN) conducted A National Survey of Elements of



Nursing Education (Li & Kenward, 2006) to identify which elements of nursing education lead to the best possible preparation of new nurses. The use of information technology, evidence based practice, integration of pathophysiology and critical thinking throughout the curriculum, teaching specialty knowledge as inde-

pendent courses, using faculty who teach didactic courses to also teach clinical practicum, increasing faculty availability to students, and promoting quality faculty-student interactions are important quality elements that reflect the structure and processes that lead to the best outcomes. The Board awaits future NCSBN and other national evidence regarding the use of transition programs and clinical simulation and its effect on nursing education outcomes.

As you embrace the newly licensed nurses on your unit, reflect on your own nursing education. When you embarked on this journey, did you feel fully prepared? Or, did you benefit from a mentor who guided you through the first few months? Will you be that mentor for someone else?

Donabedian, A. (1980). The definition of quality and approaches to its assessment. Ann Arbor, Michigan: Health Administration Press.

Li, S. & Kenward K. (2006). A national survey of elements of nursing education. NCSBN. Retrieved May 20, 2008, from https://www.ncsbn.org/ICN\_Poster(6\_Elements).pdf

## **DUPLICATE LICENSE REQUESTS**

License Type	License #	Date of Duplicate	Last Name	First Name
LPN	2181	7-Sep-07	ADAMS	JERI
APN	24629	6-Dec-07	ALLEN	JEFFREY
RN	25772	20-Dec-07	AMMONS	WALTER
LPN	27090	7-Sep-07	ANDERSON	AMY
LPN	25556	13-Mar-08	ANDERSON	TERRI
RN	12916	12-Dec-07	ANDREWS	PEGGY
RN	27381	13-Dec-07	BARNES	CASSIDY
LPN	29013	2-Nov-07	BAXTER	RHONDA
RN	27043	29-Jan-08	BENTH	DAWN
RN	27545	17-Dec-07	BIG MEDICINE	LAURAINE
RN	25032	23-Jul-07	BISHOP	SHARRESE
RN	30090	13-Nov-07	BLUM	JOY
RN	31304	4-Jan-08	BRADLEY	PATRICIA
RN	22570	4-Jan-08	BRADLEY	COLLEEN
RN	16593	24-Apr-08	BRATCHES	KATHERINE
LPN	4695	2-Jul-07	BRESE	URSULA
LPN	2457	24-Jul-07	BROCKIE	FRANCENE
LPN	6169	7-Apr-08	BUROKER	APRIL
RN	27908	18-Sep-07	BURTON	MARJORIE
RN	35358	10-Jan-08	CAMPBELL	MARY ANN
RN	8301	7-Mar-08	CAPSER	MARY
RN	14694	31-Dec-07	COLTON-THAYER	LINDA
RN	23391	19-Dec-07	COX	KELLI
RN	22161	28-Apr-08	DALE	CHARLENE
RN	16889	27-Jul-07	DANHOF	VICKI
RN	30236	22-Apr-08	DANIEL	SHAWNNA
RN	16222	10-Jan-08	DARNELL	PAMELA
RN	17164	4-Apr-08	DAVIS	DEBORAH
LPN	4813	3-0ct-07	DOTSON	BRENDA
LPN	30661	13-Dec-07	DRIVER	KATHERIN
RN	17933	4-Dec-07	DRUMMOND	GINA
RN	22498	2-Apr-08	DUVAL	HEATHER
RN	32252	25-Sep-07	EATON	KARA
RN	26611	31-0ct-07	EMERSON	AUTUM
LPN	31556	30-Nov-07	ERETH	TRINA
RN	28302	23-Jul-07	ERICKSON	SHARMAE
RN	21657	23-Jan-08	ESSEBAGGERS	TINA
RN	22530	14-Apr-08	FITZNER	JUDY
LPN	9027	13-Mar-08	FIX	JIMI
RN	32870	5-0ct-07	FORS	SHANNON
RN	14391	9-Nov-07	FOSS	MARY

	License #	Date of Duplicate	Last Name	First Name
RN	28854	14-Sep-07	GARCIA	LORYANN
RN	29749	11-Sep-07	GIBSON	DELORES
LPN	3624	19-Mar-08	GRAHAM	ANN
RN	11462	7-Sep-07	GRIGGS	JOANN
LPN	5731	5-Feb-08	GROSCOP	JOANN
RN	35406	15-Apr-08	GUNDERSON	APRIL
LPN	33246	11-Mar-08	HAMMOND	BRITTANY
RN	34560	28-Apr-08	HARGIS	MARCY
LPN	9011	17-Dec-07	HARNED	KIMBERLY
RN	13253	21-Dec-07	HARRIS	RONDA
RN	21011	28-Apr-08	HAYS	EDEN
RN	24783	27-Dec-07	HEIL	IVY
RN	30049	22-Apr-08	HENSHAW	CARMEN
RN	16380	10-May-07	HINKLE	MARY
RN	26455	6-Jun-07	HOECHST	JULIE
RN	33237	1-0ct-07	HUGHES	SHERRON
RN	24812	12-Mar-08	HUNTLY	MICHAEL
RN	16791	12-Sep-07	JACOBY	JUDY
LPN	28475	17-Sep-07	JAMES	CLARA
LPN	7448	23-Jan-08	JANCIC	JOHN
LPN	26977	4-Jan-08	JOHNSON	ANGIE
RN	16621	13-Nov-07	JOHNSON	TERESA
APN	10257	3-Aug-07	JOHNSON	MERTON
RN	11007	12-Jul-07	KEASTER	LINDA
APN	34253	30-May-07	KEMMERER	JANFRIED
RN	29121	6-Feb-08	KLINGLER	MEGAN
RN	27649	29-Apr-08	KNUTSON	KIMBERLY
RN	29909	9-Apr-08	KREBS	RAMONA
RN	32960	2-Nov-07	KYLE	KELSEY
LPN	31817	23-Nov-07	LAROQUE	JULIE
RN	20550	17-Jan-08	LE0	SIMONE
RN	30097	23-Jul-07	LONG	D
RN	35308	12-Feb-08	LUNDQUIST	BRITTANY
RN	30633	11-Mar-08	LUOMA	LORI
RN	31638	27-Jul-07	LURA	KARI
RN	35668	10-Apr-08	MARR	AMANDA
RN	26400	11-Dec-07	MAZURCZYK	NORMAN
RN	30186	28-Dec-07	MCEWEN	JENNIFER
RN	34095	12-Sep-07	MEDRANO	DORIS
RN	30540	9-0ct-07	MESSICK	NANCY
RN	35190	6-Nov-07	MILLER	CHERYL

License Type	License #	Date of Duplicate	Last Name	First Name
APN	12289	7-Apr-08	NICOL	WILLIAM
RN	26047	6-Nov-07	NIELSEN	HEIDI
LPN	33359	3-Jan-08	ODEGARD	PENNY
RN	21035	5-Nov-07	OLIVER	STACEY
RN	30165	10-Jul-07	OLSEN	MIRANDA
LPN	32300	10-Apr-08	OSWEILER	NICHOLAS
RN	24415	24-Mar-08	OSW00D	REBECCA
LPN	8906	29-Jan-08	PACE	JANET
RN	13559	11-Mar-08	RASMUSSEN	ELIZABETH
LPN	29363	17-Dec-07	REDIFER	CINDY
RN	32718	14-Nov-07	RICE	ANDREA
RN	7148	6-Dec-07	ROBINSON	LORETTA
RN	27356	29-Feb-08	ROULEAU	ELIZABETH
LPN	7006	18-Jul-07	SANDERSON	MICHELE
LPN	30860	19-Feb-08	SAYLER	BENNIE
RN	32270	6-Dec-07	SCOTT	JEANETTE
RN	24053	8-Jan-08	SCOTT	SUSAN
RN	30888	25-Sep-07	SEEFELDT	KYRA
RN	35175	7-Sep-07	SEELEY	LETAH
RN	35345	6-Nov-07	SEIPEL	JOYCE
RN	26219	24-Sep-07	SELTING	JEANETTE
LPN	26227	20-Sep-07	SIEWERT	MISTY
RN	24223	16-0ct-07	SMITH	KIM
RN	34179	14-Jan-08	SPANGLER	JOANNE
LPN	28091	15-Nov-07	STANDLEY	SEPTEMBER
RN	29441	4-Feb-08	STANFORD	JAIME
RN	20655	2-Aug-07	STEFFES	ROBIN
RN	23293	14-Jan-08	STOCKBURGER	SUSAN
RN	18465	18-May-07	STOKES	KATHY
RN	12785	3-Jan-08	STRISSEL	DENISE
LPN	8453	1-0ct-07	STURDEVANT	SUSAN
LPN	7233	20-Jul-07	TERRY	SUSAN
LPN	4182	26-Feb-08	VINCELLI	PENNY
LPN	28072	30-Jan-08	WAKEFIELD	MARLENE
RN	25840	7-Apr-08	WEAVERLING	WENDY
RN	23289	11-Dec-07	WENDELL	LISA
RN	27541	24-Jul-07	WHEELER	MICHELLE
RN	31331	4-Mar-08	WHITE	MELODY
RN	33795	6-Jun-07	WILLIAMS	CRYSTAL
RN	30252	21-Feb-08	WILSON	LAURIE
RN	21168	18-Jul-07	YOUNG	MIRIAM

# LICENSE DISCIPLINE

Name	City	State	License #	License Type	Disciplinary Action
RACHEL BECK	ARVADA	СО	35170	RN	Probation / Nurses Assistance Program
BRYAN DUNLOP	ASPEN	CO	25684	RN	3 CE Courses
TERESA WALLACE	IDAHO FALLS	ID	33221	RN	Summary Suspension
LISA HOLMES	BILLINGS	MT	16394	RN	Probation / Nurses Assistance Program
PAMELA SAYE	BILLINGS	MT	1956	LPN	(Suspension Lifted) Probation / Nurses Assistance Program
JAMIE PAGE	BOZEMAN	MT	9014	LPN	Summary Suspension
TRACY DALY	BUTTE	MT	29744	LPN	Summary Suspension
RICHARD KUCHTYN	BUTTE	MT	28617	RN	Summary Suspension
MARIA CASAS	EUREKA	MT	29684	RN	4 CE Courses
JUDY VERVICK	FAIRFIELD	MT	23030	RN	License Suspended Indefinitely
MELANIE HARRISON	<b>GREAT FALLS</b>	MT	26462	LPN	Summary Suspension
PATRICIA BRAZEL-JOHNSON	HELENA	MT	6084	LPN	Summary Suspension
JACQUELINE SONMEZ	HELENA	MT	28189	RN	License Suspended Indefinitely
KATHLEEN BROWN-SAYLOR	LAUREL	MT	18668	RN	License Suspended Indefinitely
MARYANN REITER	LAUREL	MT	24022	RN	License Suspended Indefinitely
MALISA BARNHART	MILES CITY	MT	24266	RN	Summary Suspension
CYNTHIA COOPER	MISSOULA	MT	24781	RN	License Suspended Indefinitely
MARK ESTVOLD	MISSOULA	MT	16578	RN	Probation / 5 CE Courses
GARY VASSER	MISSOULA	MT	59802	LPN	\$150.00 Fine / Letter of Reprimand
MINDY WALKER	MISSOULA	MT	28453	LPN	Summary Suspension
MICHELLE WALT	MISSOULA	MT	26562	RN	Probation / Nurses Assistance Program
JOANN OWENS	RUDYARD	MT	21929	RN	Probation / 4 CE Courses
SARA STEINBEISSER	SIDNEY	MT	29454	LPN	Summary Suspension
ELIZABETH SOHOLT	BOX ELDER	SD	32296	RN	License Suspended Indefinitely
NICHOLE NICHOLS	RICHLAND	WA	28214	RN	Summary Suspension

# CONTACT ROSTER

QUESTION	CONTACT
<ul> <li>License Renewal or Re-Activation</li> <li>License Verification</li> <li>Duplicate License</li> <li>Rule Book Orders</li> <li>General Licensing Questions</li> </ul>	Shelly Gloege OR Kelly Pfeifer (406) 841-2397 (406) 841-2345 Licensing Specialist sgloege@mt.gov kpfeifer@mt.gov
<ul> <li>Name/Address Change</li> <li>Applications for License by Examination</li> <li>Foreign Applicants</li> <li>Applications for Medication Aide License by Examination</li> </ul>	Shelly Gloege (406) 841-2397 Licensing Specialist sgloege@mt.gov
<ul> <li>Applications for Licensure by Endorsement</li> <li>APRN Applications</li> <li>Prescriptive Authority Applications</li> <li>Non-routine Applications</li> </ul>	Kelly Pfeifer (406) 841-2345 Licensing Specialist kpfeifer@mt.gov
Board of Nursing Newsletter	Barbara Swehla OR Mary Ann Zeisler (406) 841-2342 (406) 841-2332 Executive Director Associate Director bswehla@mt.gov mzeisler@mt.gov
<ul> <li>Nursing Practice</li> <li>Applications for Medication Aide Instructor and Program</li> <li>NCLEX Accommodations</li> </ul>	Mary Ann Zeisler (406) 841-2332 Associate Director mzeisler@mt.gov
<ul> <li>Formal Nursing Education</li> <li>NCLEX Accommodations</li> <li>Meeting Agenda Item Requests</li> <li>Requests for Presentation of BON Issues in your Facility and/or Community</li> </ul>	Barbara Swehla (406) 841-2342 Executive Director bswehla@mt.gov
<ul> <li>Disciplinary Issues</li> <li>Complaint Process</li> <li>License Suspension and Reinstatement</li> </ul>	Dustin Johnson (406) 841-2344 Compliance Specialist djohnson@mt.gov
<ul><li>Meeting Information</li><li>APRN License Verifications</li></ul>	Cari Harris (406) 841-2340 Program Manager caharris@mt.gov



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